

Florida Department of Agriculture and Consumer Services
Bureau of Fair Rides Inspection

INVESTIGATIVE REPORT

SUBJECT

**Midway Rides of Utica
(315) 735-8021**

**Location of Accident:
Greater Jacksonville Fair
510 Fairgrounds Place
Jacksonville, Florida**

**Skyflyer
USAID #15389**

SUBMITTED BY

**Michelle Faulk
Senior Management Analyst II**

**DATE COMPLETED:
December 17, 2018**

Case: Midway Rides of Utica/Skyflyer (USAID#15389)
Program: Fair Rides Inspection
Investigator: Larry Cook/Michelle Faulk

I. INVESTIGATIVE REFERRAL:

This case was initiated due to an accident that was reported to the Bureau on November 10, 2018, involving the swing amusement ride, "Skyflyer" (USAID#15389); owned and operated by Midway Rides of Utica. The accident occurred at the Greater Jacksonville Fair, whereby 7 patrons were injured when the seats/carriers were lowered while the ride was still rotating causing the carriers and patrons to impact the ride platform fencing. Attached, as **Exhibit 1**, written accident report and Bureau e-mail.

II. SUMMARY OF INVESTIGATION:

Business Information:

Midway Rides of Utica is not registered with the Department of State (herein DOS). There were no DOS fictitious name filings noted. The mailing address for this company is PO Box 4277, Utica, NY 13504.

There have been no prior Administrative Complaints filed against this business.

Attached, as **Exhibit 2**, is a copy of the company's insurance certificate.

Description of Ride & Operations:

The "Skyflyer" amusement ride is a trailer mounted swing amusement device which is loaded from a raised platform surrounded by a fence at the platform perimeter. The seats/carriers are hung in sets of two from cables to sweeps mounted on a rotating structure or hub. This structure is raised and lowered by a cable/hydraulic system up a fixed square tower in the center of the platform.

During normal operations of the ride passengers are loaded and the hub assembly is raised until the seats/carriers are clear of the fence. The rotation of the hub is then started, which causes the seats to fly outward from the center. Once the hub reaches the top or desired height the upward motion is stopped. After a short period at the top the hub is then partially lowered, and the operator stops the rotation of the seat/carriers. Once the rotation has ceased and the seats/carriers are hanging motionless, the operator initiates the final step in the sequence by lowering the hub to the platform.

Investigative Activity:

On November 10th and 11th, 2018, Inspector Larry Cook conducted an investigation into the accident. Upon arrival, an inspection of the ride was completed noting minimal deficiencies on the seats/carriers and fencing due to the accident. It was further noted that a limit switch and bracket were found to be damaged on the tower. It could not be determined if the switch

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was broken prior to accident or as a result of the accident.

Inspector Cook observed the operator of the ride demonstrate the sequence of events that occurred leading up to and during the accident. He noted that during the demonstration the operator foot pedal was not operational, however; the start button is considered an operator presence switch and once released it will disconnect power to the ride thus rendering the foot pedal unnecessary. During the interview the operator confirmed to inspector Cook that while the carriers were being lowered he turned toward the midway and then heard the carriers hitting the platform fencing. At this point he released his finger from the operator start button.

Inspector Cook collected a written statement from the operator, employee training records, owner's ride daily inspection reports and took photographs of the device.

Attached as **Exhibit 3**, are copies of the Inspector's inspection report and inspector memo. Printed photographs of the amusement ride taken by Inspector Cook during the follow up inspection are as follows:

Photos:

- #1 View of Starflyer swing carousel.
- #2 Starflyer USAID plate 15389 and Mfg. plate.
- #3 Close up view of Starflyer Mfg. plate, AK Rides CZECH REPUBLIC.
- #4 View of operator control pedestal located to the right of entrance stairs.
- #5 Close up view of operator control panel.
- #6 View of posted safety signage.
- #7 View of posted height marker.
- #8 View of detached ride platform fence.
- #9 Another view of detached ride platform fence.

Attached as **Exhibit 4**, are copies of inspector Cook's photos taken November 10th and 11th, 2018.

Witness Statements:

The ride operator provided both a written and verbal statement regarding the events leading up to the accident. He stated that he loaded the patrons and began the ride cycle. Approximately ¼ of the way up the tower he noticed a girl swinging in her seat/carrier at which time he then turned the switch to make the ride descend and turned the rotational knob to the off position. He further relayed that he misjudged the distance to the deck of the ride while attempting to locate the patron's parents causing the ride to descend before the rotation of the seats/carriers ceased.

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Attached as **Exhibit 5**, is the written operator statement.

The bureau inspector collected the ride daily inspection reports and employee training record. All documents appear accurate and complete. The employee training record shows that the ride operator was trained approximately 1 month prior to the incident taking place.

Attached, as **Exhibit 6**, are copies of Owners Ride Daily Inspection Reports, and Employee Training Records.

During the investigation the bureau received correspondence from the US representative for AK Rides stating that this was not the manufacturer of this device rather the device was manufactured by Winkler/Pfleger. The amusement ride serial plate (**see Exhibit 4 photos 2&3**) states that the manufacturer of the amusement ride is AK Rides Czech Republic. The Bureau cannot determine why the incorrect amusement ride serial place is affixed to the ride.

Attached as **Exhibit 7**, are copies of correspondence between AK Rides s.r.o. and the bureau.

Manufacturer Manual:

The Bureau reviewed the manufacturer manual for the Sky flyer amusement ride. The Winkler manual specifically states under prohibited use, "small children can enter on the attraction when calm and only with a parent or a close relationship aged over 18 years, furthermore; it is recommended to enter children older than 12 years". Information was received from Jacksonville Fire and Rescue confirming that the patrons who were transported due to injuries sustained from the accident were all under the age of 12-years-old and the adults listed were not on the ride when the accident took place.

Attached as **Exhibit 8**, are copies of pages from the carousel-Starflyer Mfg. by Winkler, and Jacksonville Fire and Rescue correspondence.

Company Profile:

Review of the company profile reveals this is the first reportable accident on this ride and the second reportable accident filed by this company. Inspection information shows this ride was originally permitted on November 21, 2017 however; first date of intended use in the state was September 30, 2016.

Attached, as **Exhibit 9**, is a copy of the company profile and ride inspection history.

Case: Midway Rides of Utica/Skyflyer (USAID#15389)
Program: Fair Rides Inspection
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III. INVESTIGATIVE FINDINGS:

Based on the information obtained during the investigation as outlined in this report, Midway Rides of Utica has violated the following Florida Statutes:

616.242 (19)(a)1. b. - Operating an amusement ride in a manner or circumstance that presents a risk of serious injury to a patron, in that on the day of the accident, November 10, 2018, Midway Rides of Utica's ride attendant failed to properly monitor the ride seats/carriers while being lowered. Had the ride attendant been monitoring the lowering of the seats/carriers, the impact with the ride platform fence would not have occurred.

616.242 (19)(a)1. d. - An amusement ride operated in violation of this section in that the ride attendant failed to ensure the patrons entering the ride met the age/guardian requirements as recommended by the manufacturer.

Attached as **Exhibit 10**, are copies of F.S. 616.242(19)(a)1. b. and 616.242(19)(a)1. d.

IV. RELEVANT PARTIES:

1. Larry Cook, Inspection Specialist

V. EXHIBITS:

- Ex. 1 Written accident report and bureau e-mail.
- Ex. 2 Midway Rides of Utica insurance Information.
- Ex. 3 Inspector Cook's memorandum and inspection report.
- Ex. 4 Copies of Inspector Cook's photos.
- Ex. 5 Copy of employee written statement.
- Ex. 6 Copies of employee training record and owner's ride daily inspection reports.
- Ex. 7 Copies of correspondence to bureau from AK Rides s.r.o.
- Ex. 8 Correspondence with the Jacksonville Fire Department and manufacturer's manual.
- Ex. 9 Copies of the company profile and ride inspection history.
- Ex. 10 Copy of F.S. 616.242(19)(a)1. b. and 616.242(19)(a)1. d.



Florida Department of Agriculture and Consumer Services
Division of Consumer Services/Bureau of Fair Rides Inspection

WRITTEN ACCIDENT REPORT

Section 616.242(14)(a), Florida Statutes, Rule 5J-18.0012, Florida Administrative Code

ADAM H. PUTNAM
COMMISSIONER

Phone 1-800-435-7352; Fax (850) 410-3797; (PM) 800-663-3542
FairRides@FreshFromFlorida.com

ANY ACCIDENT FOR WHICH A PATRON IS TRANSPORTED TO A HOSPITAL MUST BE REPORTED BY PHONE WITHIN 4 HOURS OF THE OCCURRENCE, FOLLOWED BY A WRITTEN REPORT WITHIN 24 HOURS TO THE DEPT. OF AGRICULTURE AND CONSUMER SERVICE, BUREAU OF FAIR RIDES INSPECTION: 2005 APALACHEE PARKWAY, TALLAHASSEE, FL 32399-6500. PH (1-800-663-3542), FAX (1-850-410-3797); E-MAIL: FAIRRIDES@FRESHFROMFLORIDA.COM

Date of Accident: 11/10/18

Time of Accident: 3:10 a.m. ☐ p.m. ☒

Amusement Ride Information:

Name of Amusement Ride Company: Midway

Rides of Utica

Address: Po Box 4277

City: Utica NY State: NY

Zip: 135 Ph. #: 725 7453 Fax #

Name of Fair/Event/ Location: Jacksenville

Address: 510 Fingert PI

City: Jacksenville State: FL

County: DuVal

Phone number where person completing report can be

reached: 315 360 3275

Amusement Ride name: Sky Flyer

USAID #: SF 2015/3

Name of Operator: _____

Did accident occur on ride: Yes ☒ No ☐

If yes, describe how accident occurred. If no, where did accident occur?

Swings came down
Rotation 09

Write additional information on back

Matt Tucker
Print Name of Person Completing Report

Injured Patron Information:

Was Patron transported or sought medical attention:

Yes ☒ or No ☐

Name: 2 Patrons Various Injuries

Age in years: _____ Gender: Male ☐ Female ☐

Address: _____

City: _____ State: _____

Zip: _____ Ph. #: _____

Parent/Guardian Name: _____

Describe injury(s): _____

Witness Name: _____

Address: _____

City: _____ State: _____

Zip: _____ Ph #: _____

Signature

Date

Harrison, Allan

From: Harrison, Allan
Sent: Tuesday, November 13, 2018 7:11 AM
To: Lawhon, Holly
Cc: Faulk, Michelle
Subject: Midway Rides of Utica Jacksonville Fair accident 11-10-18

FYI,

The bureau received a call at approximately 3:45 pm, Saturday, November 10, 2018, reporting that a swing ride, "Sky Flyer" (USAID#15389); lowered on the tower during operation, causing the carriers to bump the ride platform fence. Fifteen to twenty patrons exited and were walking around under their own power. There were no visible injuries, but at least seven were transported as a precaution for further examination. The device "Sky Flyer" mfg. by AK Rides is owned by Midway Rides of Utica, a company that has three rides booked in with Belle City Amusements, the company that has the Jacksonville Fair contract. The Sky Flyer is a swing type ride that after the carriers are raised in static mode, they then begin to rotate while raising on the tower. At this time the ride is closed, and will remain closed until the investigation has been completed with a cause determined. Our inspector Larry Cook on call was dispatched from Ormond Beach and is in the process of securing the site. I will keep everyone informed as I receive updates from our inspector.

Sent from my iPhone



CERTIFICATE OF LIABILITY INSURANCE

EXHIBIT 2DATE (MM/DD/YYYY)
9/27/18

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Allied Specialty Insurance, Inc
10451 Gulf Blvd
Treasure Island, FL 33706
8002373355

CONTACT

NAME:

PHONE

(A/C, No, Ext):

FAX

(A/C, No):

E-MAIL:

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: T.H.E. Insurance Company

12866

INSURER B:**INSURER C:****INSURER D:****INSURER E:****INSURER F:**

INSURED Midway Rides of Utica
Dana Peck
P.O. Box 4277
Utica NY 13504

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPP0100109-08	04/15/18	04/15/19	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CPP0100109-08	04/15/18	04/15/19	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RIDE SCHEDULE ATTACHED

CERTIFICATE HOLDER**CANCELLATION**

BUREAU OF FAIR RIDES INSPECTIONS
DIVISION OF STANDARDS
2005 APALACHEE PARKWAY
TALLAHASSEE FL 32399

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Date: 9/27/18

Albion Specialty Insurance, Inc.
General Liability Schedule

Page: 1

User: KCARROLL

Display

Policy CFP0100109-08 Effective Date 4/15/18 Expiration Date 4/15/19
Insured Name Midway Rides of Utica
Policy SMP Special Multi Peril
Location 001 Building 001

Item

Number	Description Including Manufacturer	Serial Number
1	Mobile Equipment Liability	N/A
2	MOBILE EQUIPMENT OWNED OR LEASED BY NAMED INSURED	N/A
3	1989 HAMPTON COMBO	RT350689
4	1992 SELLNER TILT A WHIRL	2031-E7-92
5	1999 FREDERIKSEN FUN SLIDE	1F9FS4010X7162002
6	1994 ELI BRIDGE ADULT SCRAMBLER	369-71-R94
7	2007 DARTRON WINDGLIDER	302131
8	2001 MAJESTIC SCOOTER CARS	1M9LU45S0ZW276270
9	2001 VENTURE KIDDIE JET SKI	MRU 1200-R-01
10	2001 WISDOM HIMALAYA	100982
11	2003 USA CAROUSEL MERRY GO ROUND	MG00318C102
12	1999 WISDOM RAIDERS	1F9GRW354XM063239
13	1995 ARM VORTEX SKYMASTER (32 PASSENGER)	SM-280-701-95
14	1989 WISDOM CATTERPILAR (GO GATOR)	831 387
15	2009 SELLNER DIZZY DRAGON	DRAGON-94T-09
16	1989 HAMPTON MOTORCYCLE	HAMPTMMCJ200802
17	1969 EYERLY ROCK O PLANE	6544
18	2006 HI LITE SLIDE MODEL HLRS3	1H9FS24256G326011
20	1994 ELI BRIDGE HY 5 WHEEL	89-94
21	2014 CUTTING EDGE INFLATABLE 18' FIRE TRUCK SLIDE	N/A
22	2014 CUTTING EDGE 13X14 COW BOUNCE	N/A
23	1994 BIG ELI LITTLE WHEEL	IE9K00007RJ00815
24	1995 ZAMPERLA JEEP ADVENTURE	SA12F003US95
25	2015 AK SKYFLYER WSMS698000485740	SF2015/3
26	2009 VERTICAL REALITY (4) POSITION BUNGEE	VR846A21
27	2000 ZAMPERLA JUMPIN STAR	GJM06R0018US

Date: 9/27/18

Albion Specialty Insurance, Inc.
General Liability Schedule

Page: 2

User: KCARROLL

Display

Policy CBPQ100109-08 Effective Date 4/15/18 Expiration Date 4/15/19
Insured Name Midway Rides of Utica
Policy SMP Special Multi Peril
Location 002 Building 001

Item

Number Description Including Manufacturer

Serial Number

27 WINTER QUARTERS/PREMISES

Mendelson, Tyler

From: [REDACTED]
Sent: Thursday, September 27, 2018 1:58 PM
To: FairRides
Cc: [REDACTED]
Subject: Certificate for Midway Rides of Utica
Attachments: Certificate.pdf; GLschedule.pdf

Dear :

Attached is an original and/or a duplicate Certificate of Insurance.

Thank you for the opportunity to serve you. If you have any questions please feel free to contact me anytime.

Sincerely,
Katie Carroll
[REDACTED]

CONFIDENTIALITY: This communication, including attachments, is for the exclusive use of the addressee(s) and may contain proprietary, confidential or privileged information. If you are not the intended recipient, any use, copying, disclosure, or distribution or the taking of any action in reliance upon this information is strictly prohibited. If you are not the intended recipient, please notify the sender immediately and delete this communication and destroy all copies.

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Florida Department of Agriculture & Consumer Services
ADAM PUTNAM, Commissioner
The Capitol • Tallahassee, FL 32399-0800

Memorandum for the Record

On Saturday November 10th, 2018, I was contacted by Allan Harrison, Bureau Chief to be dispatched to an accident at the Greater Jacksonville Fair, 510 Fairgrounds Place in Jacksonville, Florida.

The accident occurred at approximately 3:00 pm on Saturday, November 10th, 2018 involving the Skyflyer amusement ride owned and operated by Midway Rides of Utica. During operation the seats/carrier impacted the ride perimeter fence located on the ride platform, injuring seven riders. The ride bears USAID 15389, permit (57379), inspection certificate (203193) and Manufacturer ID SF2015/3. The permit, insurance and inspection certificate were current at the time of my investigation.

Upon arrival at the fairgrounds I met with Mr. Matt Turner, a representative for Midway Rides of Utica. Mr. Turner explained that the area remained untouched other than reinstalling some of the fence sections which were resting on his vehicle. I photographed the area to include the fence and carriers noting minor damage.

The Skyflyer amusement ride is a swing type ride, loaded from a raised platform surrounded by a fence at the platform perimeter. The seats/carriers are hung in sets of two from cables to sweeps mounted on a rotating structure or hub. This structure is then raised and lowered by a cable/hydraulic system up a fixed square tower in the center of the platform.

The normal ride cycle, for a device with similar operating characteristics, would be to load passengers into the seats/carriers and raise the hub assembly until the seats/carriers are clear of the fence. The rotation of the hub is then started, which causes the seats/carriers to fly outward from the center. When the hub reaches the top or desired height the upward motion is stopped. After a short period at the time the hub is lowered to a designated location on the tower at which time the rotation is stopped.

Once the rotation is stopped and the seats/carriers are hanging motionless, the hub is lowered to the platform.

During normal operation, the rotation of the ride is stopped before the seats/carriers reach the platform fencing. The operator has control to pause the lowering of the ride or stop the rotation of the seats/carriers should a situation occur. This can be accomplished by turning the lift switch on the control panel to the off position or removing the operator's finger from the start button.

The sequence of operation as described to me by the operator and Mr. Turner is as follows. After loading the passengers, the lap bar switch is placed in the lock position. The key switch is turned to the on position to activate power to device and the operator presses and holds the start button which is also known as the operator presence switch. The ride is operated manually by the operator who then turns the lift switch to the up position and does not turn on the rotation of the swings until the seats/carriers reach a specific location on the ride tower. At the end of the ride cycle the operator turns the rotation of the seats/carriers to the off position prior to lowering them to the ride platform. (see attached photo of the control panel.)

I then conducted an interview with the operator, Mr. Terrence Scott who relayed the events that led up to the accident. He stated that during the ride cycle, the passengers were loaded, and the seats/carriers began to lift. At approximately $\frac{1}{4}$ of the way up the tower, he observed a young girl swinging her seat/carrier in a front to back motion. This action could result in the seats/carriers impacting or entangling with each other, so he switched the ride to lower and turned off the rotation of the seats/carriers. Mr. Scott then stated he turned to look toward the crowd to see if the girl's parents were there as he expected a conflict with them when he removed the patron from the ride. While looking toward the midway he heard the seats/carriers hitting the ride platform fencing. At this point, he released his finger from the start button which caused the motor(s) to stop.

It should be noted that a swing device of this type loaded with riders has a great deal of inertia and will continue to rotate until the energy has dissipated. The seats/carriers would continue to impact the ride platform fencing until the ride came to a complete stop.

While no official documents were available as to the number of patrons transported, the general estimate of those I spoke with onsite put the total number of patrons transported to around 6 or 7.

Stop Operations Order #6921 was issued to the Sky Flyer amusement ride and I conducted an out brief with fair officials, departing until the next day when lighting was more conducive for a full inspection of the device.

On the morning of Sunday, November 11, 2018, I returned to continue my inspection of the ride. Both Mr. Turner and Mr. Scott were onsite and again confirmed the events of the night before. Mr. Scott completed a written statement which mirrored his previous verbal statement to me on the day of the accident. I was provided the Employee Training Records as well as a partial list of the patrons injured and their guardians. The Owners Daily Inspection report was not on site, however; it was provided by Belle City Amusements prior to completing my inspection.

During my inspection of the ride, I noted deficiencies with carrier #5 as well as a broken limit switch positioned on the ride tower. It cannot be determined if the limit switch was broken prior to the accident or as a result of the accident. It should be noted that the operator foot pedal was not operational however; the operator presence switch on the control panel can be substituted for this device.

Mr. Scott then demonstrated his operation of the ride at the time of the accident confirming his written and verbal statement. During the demonstration when Mr. Scott reached the point of "looking for the parents", he kept his body parallel to the control panel and his finger on the start button while turning his head to the left to look toward the parents.

The ride was run for several cycles and operated as expected. The company indicated they had no intention of reopening the ride at this location and stop operation order #6921 remained.



LB Cook
Inspection Specialist
Bureau of Fair Rides Inspection

December 7, 2018



Florida Department of Agriculture and Consumer Services
Division of Consumer Services/Bureau of Fair Rides Inspection

EVENT RECAP

Phone 1-800-435-7352; Fax (850) 410-3797
FairRides@FreshFromFlorida.com

ADAM H. PUTNAM
COMMISSIONER

MIDWAY RIDES OF UTICA
P.O. BOX 4277
UTICA, NY 13504

INVOICE #: 3133248 PURPOSE: Accident
EVENT NAME: GREATER JACKSONVILLE FAIR
EVENT ADDRESS/LOCATION: 510 FAIRGROUNDS PLACE
EVENT CITY/COUNTY: JACKSONVILLE/DUVAL
OPEN DATE: 11/10/2018 INSPECTION #: 1811-33260

# Rides: 1	# Rides Passed: 0	# Rides Failed: 1	# Rides Not Ready: 0	# Rides No Data: 0
# Go Karts: 0	# Go Karts Passed: 0	# Go Karts Failed: 0	# Go Karts Not Ready: 0	# Go Karts No Data: 0

USAID	Theme Name	Status	IC/RT #	Deficiency	OST #	Unit
15389	SKY FLYER	Fail	6921	Operation - Rpm Check: Other		

USAID	Theme Name	Comments
15389	SKY FLYER	STOP OP ISSUED DUE TO ACCIDENT THIS DATE

☐ I acknowledge that all identified rides issued a stop operation order (RT #) and/or carriers or components issued an out of service (OST #) are not in compliance with Florida Statute 616.242 and/or Rule Chapter 5J-18, F.A.C. and shall not operate until it passes a subsequent inspection by the Department.

Larry Cook
Inspector's Name

Joe Sigel
Owner/Manager

11-10-18
Date

Ride inspection Report



Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Inspection Worksheet

ADAM H. PUTNAM, COMMISSIONER

Date: 12/11/2018 07:42:13

Page 1 of 1

Inspection #: 1811-33260
Inspector: COOK, LARRY
Open Date: 11/10/2018
Close Date: 11/11/2018

Event: GREATER JACKSONVILLE FAIR
Location: 510 FAIRGROUNDS PLACE
JACKSONVILLE, DUVAL

Company: MIDWAY RIDES OF UTICA

USAID#: 15389
Theme: SKY FLYER
Serial#: SF2015-3
Type: Super Ride
MFG: WINKLER/PFLEGER
IC #:

Inspect By Date: 11/10/2018
Permit #: 57379

Red Tag #:

Inspection Not Started ☐

Left: bunk house

Right: rope climb

DEFICIENCIES:

OST#:

Report due to accident 11/10/18

Unresolved OSTs: None
Correction Notices: None



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Consumer Services/Bureau of Fair Rides Inspection

AMUSEMENT RIDE INSPECTION REPORT

Section 616.242(4), Florida Statutes
Rule 5J-18.0012, Florida Administrative Code

Phone 1-800-435-7352; Fax (850) 410-3797
FairRides@FreshFromFlorida.com

DATA:

Date 11/10/18 Ride Owner Midway Ridesg Utter Scheduled - Unannounced OK
Inspector Coak #13 Ride Name Skyflyer Re-inspection - Permit
Event Shuttle Jax Car MFG AK Rides Chet Inspection/Red Tag History
Location SF 2015/3 Serial # 15389 Temporary - Permanent
USAID # 57379 Location When Facing:
Permit # 57379 L. Paul Nov R. Pope Club

KIDDIE NON-KIDDIE SUPER

REQUIREMENTS: (Check each requirement as it is accomplished or place (N) if not applicable)

1. RIDE STATUS

- a. () Permit
- b. () Insurance
- c. () Compliance/NDT
- d. () Manuals

2. INSTALLATION

- a. () Blocking
- b. () Fencing/Guarding
- c. () Braces/Guys/Anchors
- d. () Signs
- e. () Electrical

3. STRUCTURAL

- a. () Hydraulics/Pneumatics
- b. () Pins/Bolts/Keys
- c. () Structural Integrity
- d. () Tires/Wheels/Casters
- e. () Bearings/Spindles/Axles
- f. () Track/Rim Iron

4. ATTACHMENTS

- a. () Gen Attachments
- b. () Carrier/Tubs
- c. () Restraints
- d. () Sweeps

5. OPERATION

- a. () RPM Check
- b. () Controls
- c. () Brakes
- d. () Limit Controls

6. OTHER

- a. () Automatic Sprinkler/Smoke Detector
- b. () Water Quality
- c. () Bungy Cords
- d. () Cranes
- e. () Comments

DEFICIENCIES:

Report due to accident 11/10/18

RESULTS:

- ☐ PURSUANT TO Section 616.242(7), F.S., AN INSPECTION CERTIFICATE IS ISSUED, when box is checked. The above identified amusement ride meets the requirements of Section 616.242, F.S. and Rule Chapter 5J-18, F.A.C. and the deficiencies noted above (if any) have been corrected. INSPECTION CERTIFICATE (FDACS 03550, Rev. 01/09) # _____

I acknowledge receipt of this inspection report and the NOTICE OF RIGHTS on the reverse side of this form. I certify this amusement ride is in compliance with Section 616.242, F.S. The employee responsible for operating this ride has been trained in accordance with Section 616.242(16), F.S. and the manufacturers operating instructions or the operating fact sheets for this ride are available to the operator, and the last 14 daily inspection reports were completed and available upon request.

Owner/Manager Signature

Inspector's Signature

☒ PURSUANT TO Section 616.242(7), F.S., the above identified amusement ride does not meet the requirements of Section 616.242, F.S. and Rule Chapter 5J-18, F.A.C. and shall not operate until it passes a subsequent inspection by the Department. STOP OPERATION ORDER (FDACS 03545, Rev. 12/09) # 6921

Owner/Manager Signature

Inspector's Signature

Administrative Hearing Available

If you wish to contest the Department's action, you have the right to request an administrative hearing to be conducted in accordance with Sections 120.569 and 120.57, Florida Statutes and to be represented by counsel or other qualified representative. Your request for hearing must contain:

1. Your name, address, and telephone number, and facsimile number (if any).
2. The name, address, and telephone number, and facsimile number of your attorney or qualified representative (if any) upon whom service of pleadings and other papers shall be made.
3. A statement that you are requesting an administrative hearing and dispute the material facts alleged by the department, in which case you must identify the material facts that are in dispute (formal hearing), or that you request an administrative hearing and that you do not dispute the facts alleged by the department (informal hearing).
4. A statement of when (date) you received this Notice and the file number of this Notice.

Your request for a hearing must be received at the address shown on this Notice within twenty-one (21) days of receipt of this Notice. If you fail to obtain a Release from this Notice or fail to request an administrative hearing within the twenty-one (21) day deadline you waive your right to a hearing and the Department may enter a Final Order imposing up to the maximum penalties as authorized by Florida Law.

I have read this notice of rights:

SIGNATURE OF OWNER

DATE



Florida Department of Agriculture and Consumer Services
Division of Consumer Services/Bureau of Fair Rides Inspection

EVENT RECAP

Phone 1-800-435-7352; Fax (850) 410-3797
FairRides@FreshFromFlorida.com

ADAM H. PUTNAM
COMMISSIONER

MIDWAY RIDES OF UTICA
P.O. BOX 4277
UTICA, NY 13504

INVOICE #: 3133617 PURPOSE: Accident
EVENT NAME: GREATER JACKSONVILLE FAIR
EVENT ADDRESS/LOCATION: 510 FAIRGROUNDS PLACE
EVENT CITY/COUNTY: JACKSONVILLE/DUVAL
OPEN DATE: 11/11/2018 INSPECTION #: 1811-33290

# Rides: 1	# Rides Passed: 0	# Rides Failed: 1	# Rides Not Ready: 0	# Rides No Data: 0
# Go Karts: 0	# Go Karts Passed: 0	# Go Karts Failed: 0	# Go Karts Not Ready: 0	# Go Karts No Data: 0

USAID	Theme Name	Status	IC/RT #	Deficiency	OST #	Unit
15389	SKY FLYER	Fail	6921	Attachments - Carrier/Tubs: Damaged		5
				Installation - Stairs/Ramps/Decks/Walkways: Improper distance to ground (more than 9 1/2 inches)		
				Operation - Controls: Improper operation of control switches		
				Operation - Rpm Check: Other		

USAID	Theme Name	Comments
15389	SKY FLYER	THIS INSPECTION IS DAY TWO OF ACCIDENT INVESTIGATION. DEVICE REMAINS UNDER REDTAG PENDING FURTHER INVESTIGATION. THIS INSPECTION WAS ORIGINALLY DONE ON CARBON ARI FORMS, ENTERING INTO DOCS TO CAPTURE INSPECTION INFORMATION. DEFICIENCIES CODES CONVERTED TO TO DOCS FORMAT. COLLECTED OWNERS DAILY INSPECTION, OPERATOR STATEMENT, EMPLOYEE TRAINING RECORD, AND PARTIAL LIST ON PATRONS ON RIDE. OWNERS DAILY INSPECTION ARRIVED AFTER HARD COPY FORMS WERE SIGNED AND SPLIT.

☐ I acknowledge that all identified rides issued a stop operation order (RT #) and/or carriers or components issued an out of service (OST #) are not in compliance with Florida Statute 616.242 and/or Rule Chapter 5J-18, F.A.C. and shall not operate until it passes a subsequent inspection by the Department.

Larry Cook
Inspector's Name

Joe Attache 11-11-18
Owner/Manager Date
Amusement Rides Inspection Report



Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Inspection Worksheet

ADAM H. PUTNAM, COMMISSIONER

Date: 12/11/2018 07:48:59

Page 1 of 1

Inspection #: 1811-33290
Inspector: COOK, LARRY
Open Date: 11/11/2018
Close Date: 11/11/2018

Event: GREATER JACKSONVILLE FAIR
Location: 510 FAIRGROUNDS PLACE
JACKSONVILLE, DUVAL

Company: MIDWAY RIDES OF UTICA

USAID#: 15389
Theme: SKY FLYER
Serial#: SF2015-3
Type: Super Ride
MFG: WINKLER/PFLEGER
IC #:

Inspect By Date: 11/11/2018 Permit #: 57379

Red Tag #:

Inspection Not Started ☐

Left: joint

Right: rope climb

DEFICIENCIES:

OST#:

2.a.14 improper distance to ground (steps)

4.b.2. Cables #5 damaged Fiberglass back of seat

5.b.11. Foot switch does not operate

Collectal OWNERS daily inspections, Employee TRAINING Records
not on site

5.d.2 Proximity switch bracket broken

Issue stop operation order 6921 pending further investigation

Unresolved OSTs: None

Correction Notices: None



Florida Department of Agriculture and Consumer Services
Division of Consumer Services/Bureau of Fair Rides Inspection

AMUSEMENT RIDE INSPECTION REPORT

ADAM H. PUTNAM
COMMISSIONER

Section 616.242(4), Florida Statutes
Rule 5J-18.0012, Florida Administrative Code

Phone 1-800-435-7352; Fax (850) 410-3797
FairRides@FreshFromFlorida.com

DATA:

Date 10/11/18 Ride Owner UTICA Scheduled - Unannounced
Inspector Coak Ride Name Sky Flyer Re-inspection - Permit
Event Heather Jax Fair MFG AK Rides CZECH Inspection/Red Tag History
Location 510 Fannin St Serial # SF2015-3 Temporary - Permanent
Dubuque USAID # 15389 Location When Facing:
Permit # 57379 L. Joub R. Rope Climb

KIDDIE NON-KIDDIE SUPER

REQUIREMENTS: (Check each requirement as it is accomplished or place (N) if not applicable)

1. RIDE STATUS

- a. () Permit
- b. () Insurance
- c. () Compliance/NDT
- d. () Manuals

2. INSTALLATION

- a. () Blocking
- b. () Fencing/Guarding
- c. () Braces/Guys/Anchors
- d. () Signs
- e. () Electrical

3. STRUCTURAL

- a. () Hydraulics/Pneumatics
- b. () Pins/Bolts/Keys
- c. () Structural Integrity
- d. () Tires/Wheels/Casters
- e. () Bearings/Spindles/Axles
- f. () Track/Rim Iron

4. ATTACHMENTS

- a. () Gen Attachments
- b. () Carrier/Tubs
- c. () Restraints
- d. () Sweeps

5. OPERATION

- a. () RPM Check
- b. () Controls
- c. () Brakes
- d. () Limit Controls

6. OTHER

- a. () Automatic Sprinkler/Smoke Detector
- b. () Water Quality
- c. () Bungy Cords
- d. () Cranes
- e. () Comments

DEFICIENCIES:

4a Damage to suspension back of seat # 5
5b Proximity switch bracket broken, issued stop order 6921, pending further investigation 5b Footswitch does not operate
2a Steps too high
6e Collected owners daily inspections. Employee Training Records not on site

RESULTS:

- ☐ PURSUANT TO Section 616.242(7), F.S., AN INSPECTION CERTIFICATE IS ISSUED, when box is checked. The above identified amusement ride meets the requirements of Section 616.242, F.S. and Rule Chapter 5J-18, F.A.C. and the deficiencies noted above (if any) have been corrected. INSPECTION CERTIFICATE (FDACS 03550, Rev. 01/09) # _____

I acknowledge receipt of this inspection report and the NOTICE OF RIGHTS on the reverse side of this form. I certify this amusement ride is in compliance with Section 616.242, F.S. The employee responsible for operating this ride has been trained in accordance with Section 616.242(16), F.S. and the manufacturers operating instructions or the operating fact sheets for this ride are available to the operator, and the last 14 daily inspection reports were completed and available upon request.

Owner/Manager Signature

Inspector's Signature

- ☒ PURSUANT TO Section 616.242(7), F.S., the above identified amusement ride does not meet the requirements of Section 616.242, F.S. and Rule Chapter 5J-18, F.A.C. and shall not operate until it passes a subsequent inspection by the Department. STOP OPERATION ORDER (FDACS 03545, Rev. 12/09) # 6921

Owner/Manager Signature

Inspector's Signature

Administrative Hearing Available

If you wish to contest the Department's action, you have the right to request an administrative hearing to be conducted in accordance with Sections 120.569 and 120.57, Florida Statutes and to be represented by counsel or other qualified representative. Your request for hearing must contain:

1. Your name, address, and telephone number, and facsimile number (if any).
2. The name, address, and telephone number, and facsimile number of your attorney or qualified representative (if any) upon whom service of pleadings and other papers shall be made.
3. A statement that you are requesting an administrative hearing and dispute the material facts alleged by the department, in which case you must identify the material facts that are in dispute (formal hearing), or that you request an administrative hearing and that you do not dispute the facts alleged by the department (informal hearing).
4. A statement of when (date) you received this Notice and the file number of this Notice.

Your request for a hearing must be received at the address shown on this Notice within twenty-one (21) days of receipt of this Notice. If you fail to obtain a Release from this Notice or fail to request an administrative hearing within the twenty-one (21) day deadline you waive your right to a hearing and the Department may enter a Final Order imposing up to the maximum penalties as authorized by Florida Law.

I have read this notice of rights:

SIGNATURE OF OWNER

DATE



C:\DDB\EXH-4\Photo #2

AK RIDES CZECH REPUBLIC
NAME: SKYFLYER
ID# SF2015/3
SPEED: 110T/MIN
CAPACITY: 20
MAX TOTAL WEIGHT: 4,409.25LBS

US AMUSEMENT ID
15389



AK RIDES CZECH REPUBLIC

NAME: SKYFLYER

ID# SF2015/3

SPEED: 110T/MIN

CAPACITY: 20

MAX TOTAL WEIGHT: 4,409.25LBS





IDE TAKES



CKETS
ASH ACCEPTED

SAFETY

"YOUR SAFETY IS OUR GOAL"
READ ALL POSTED RULES

OBSERVE age, height, and weight restrictions

FOLLOW instructions of the ride operator

KEEP hands, arms and legs inside ride at all times

USE safety equipment such as a seat belt, shoulder harness, lap bar or chain when provided

WATCH the ride in operation and make sure you & your child can ride safely

DO NOT force your child to ride if he or she is frightened.
A scared child on the ground may well panic in the air

ALL children must be of a size to hold themselves erect & stable

GUESTS SHOULD EXPECT

- ★ STRONG SIDE TO SIDE FORCES ★
- ★ RAPIDLY CHANGING TURBULENT FORCES ★
- ★ STRONG FRONT TO BACK FORCES ★
- ★ RAPIDLY CHANGING HEIGHTS ★

HEIGHT RESTRICTIONS:

This Tall
With Adult

This Tall
Without Adult

4'6"

Not
Over

THIS ATTRACTION IS NOT RECOMMENDED FOR GUEST WITH:



JIMMY'S STICKER SHACK 860-534-7639

SKY FLYER

SAFETY FIRST!!

Enjoy
your
ride.

52

50

48

46

44

42

40

38

36

Minimum
height
required

LOOK EXHIBIT PHOTO #8





STATEMENT

NAME: (Please Print) _____

DATE OF BIRTH: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME TELEPHONE: () _____ CELL PHONE: () _____

WORK TELEPHONE: () _____ OTHER PHONE: () _____

Date of Statement: _____ Time of Statement: _____

RIDE WAS $\frac{1}{4}$ WAY UP WHEN I SAW GIRL SWINGING
 TURNED THE SWITCH TO MAKE RIDE DESCEND.
 ALSO TURNED ROTATION KNOB TO "OFF" POSITION.
 RIDE WAS STILL DESCENDING BEFORE ROTATION CEASED
 HIS JUDGED DISTANCE TO THE DECK OF THE RIDE WHEN
 I BEGAN THE RIDE DESCENT DUE TO MY ATTEMPT
 AT FINDING GIRL'S PARENTS AT RIDE GATE.

I HAVE GIVEN THIS STATEMENT VOLUNTARILY AND OF MY OWN FREE WILL WITHOUT ANY THREATS OR PROMISES,
 AND THE INFORMATION CONTAINED IN THIS STATEMENT IS TRUE AND CORRECT.

 Signature of Person Giving Statement



Florida Department of Agriculture and Consumer Services
Bureau of Fair Rides Inspection

EXHIBIT 6

EMPLOYEE TRAINING RECORD

Section 616.242(16), Florida Statutes,
Rule 5F-8.0012, Florida Administrative Code

Phone (850) 488-9790; Fax (850) 488-9023

ADAM H. PUTNAM
COMMISSIONER

Amusement Ride Company

Skyflyer

Employee Name [REDACTED] (print)

Trainer Name [REDACTED] (print)

Name of Amusement Ride and Serial Number SF 205/3

OPERATION TRAINING	DATE	SIGNATURE OF EMPLOYEE	SIGNATURE OF TRAINER
1. Operating Procedures	10/10/18	[REDACTED]	[REDACTED]
2. Specific Duties	10/10/18	[REDACTED]	[REDACTED]
3. General Safety Procedures	10/10/18	[REDACTED]	[REDACTED]
4. Emergency Procedures	10/10/18	[REDACTED]	[REDACTED]
5. Demonstration of the physical ride operation	10/10/18	[REDACTED]	[REDACTED]
6. Supervised observation of the physical operation	10/10/18	[REDACTED]	[REDACTED]
7. Additional instructions from owner	10/10/18	[REDACTED]	[REDACTED]
MAINTENANCE TRAINING	DATE	SIGNATURE OF EMPLOYEE	
1. Inspection/Preventive maintenance procedures	10/10/18	[REDACTED]	
2. Specific duties	10/10/18	[REDACTED]	
3. General safety	10/10/18	[REDACTED]	
4. Demonstration of performance of assigned duties and inspections	10/10/18	[REDACTED]	
5. Supervised observation of performance	10/10/18	[REDACTED]	

I certify that the employee identified above has successfully completed all necessary training required for compliance with ASTM-F24 Committee Standards, as indicated by the date of completion and trainer's signature in the appropriate column. The trainers who conduct the training also meet the requirements of ASTM-F24 Committee Standards and are certified by the company to conduct training, supervise, and observe the inspections and operations of the rides listed hereon. The owner or manager executing this personnel training record certifies that the employee identified hereon is trained in all operation and inspection procedures for each amusement ride listed hereon as required by section 616.242(16), Florida Statutes and rule 5F-8, Florida Administrative Code. Training requirements listed on this table are minimum requirements. A ride owner or manager may attach a ride specific training sheet to this Employee Training Record instead of recording training information on this form by writing "see attached" in the training results for that date. Note that the administrative information on this form: company name, ride name, USAID/SN and trainers signature must be completed.

[Signature]
Signature of Owner/Manager

10/10/18
Date



Florida Department of Agriculture and Consumer Services
Division of Consumer Services/Bureau of Fair Rides Inspection
OWNERS' DAILY INSPECTION REPORT (CARNIVAL TYPE)

ADAM H. PUTNAM
COMMISSIONER

Section 616.242(15), Florida Statutes, Rule 5J-18.0012, Florida Administrative Code

Phone: 1-800-435-7352; Fax: (850) 410-3797
FairRides@FreshFromFlorida.com

COMPANY Midway Rides & Attractions RIDE NAME SKY Flyer USAID & SERIAL # SF2015/3

INSTRUCTIONS: Use this form for daily inspections of each amusement ride as required by Section 616.242(15), Florida Statutes. Inspection requirements are listed on the left side of the table below. Each day the ride is inspected, enter the month, date and year (10-1-04) in the space provided across the top of the table. When completing an inspection requirement, place a check mark "✓" in the space provided to indicate the inspection has taken place and there are no deficiencies. If a deficiency is found, place "X" in the space provided. On the back of this form, record the date the deficiency was found, the deficiency, corrective action and signature and date of person taking corrective action. If an inspection item is not applicable to this ride, put "N" in the space provided. The inspection requirements in the table are the minimum requirements for inspection. A ride owner or manager may attach a ride specific inspection sheet to this Owners' Daily Inspection Report instead of recording inspection information on this form, by writing "see attached" in the inspection results for that date. Note that the administrative information on this form: company name, ride name, USAID/SN and inspectors signature must be completed. The last 14 days of inspections must be kept on site and made available immediately to the department inspector upon request. This table was constructed to record 14 days of inspection on one report. The person inspecting the ride must sign across the bottom of this form after each daily inspection and thereby certifies that the ride complies with all requirements of Section 616.242, Florida Statutes.

Enter inspection dates across the top →	10/31	11/1	11/2	11/3	11/4	11/5	11/6	11/7	11/8	11/9	11/10	11/11			
Inspr. Requirements:															
Blocking	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Fencing/Guarding	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Braces/Guys/Anchors	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Signs	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Electrical	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Hydraulics/Pneumatics	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Pins/Bolts/Keys	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Structural Integrity	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Tires/Wheels/Casters	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Bearings/Spindles/Axles	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Track/Rim Iron	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Gen Attachments	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Carrier/Tubs	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Restraints	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Sweeps	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
RPM Check	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Controls	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Brakes	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Limit Controls	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Inspector Signature →	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>	<u>JK</u>			

DEFICIENCY LOG

Document deficiency noted with "X" on front in this table

Date deficiency noted	Deficiency	Corrective Action	Signature and date
10/7	Motor contactor went Bad	Replaced motor contactor	Mace 10/7/18

Harrison, Allan

From: Alan Ferguson [REDACTED]
Sent: Monday, November 12, 2018 3:30 PM
To: Harrison, Allan
Subject: AkRides/Funlight Amusements/ Florida Accident Swing Tower / Jacksonville FAIR
Attachments: attachment 1.pdf

Hello Alan,

Below is Sign Stamped Certificate from AK Rides,, Funlight Amusements with Regards to the Jacksonville Fair Florida.

If you have any questions or concerns please Call or Email

I (Alan Ferguson) am the USA Representative for AK Rides & Funlight Amusements.

I,, nor AK Rides/ Funlight Amusements have not had any involvement with said Ride involved in Accident at Jacksonville Fair 11/10/2018.

The said Swing Tower was Manufactured by WINKLER / PFLEGER!

Please remove from Media the false advertising that Swing Tower was Manufacturer by AK Rides & Funlight Amusements.

See Certificate below.

With Best Regards, Alan

[REDACTED]
Texas, USA



FUN LIGHT AMUSEMENTS

THE BIGGEST SUPPLIER
OF
AMUSEMENT EQUIPMENT
IN EAST EUROPE!



Statement

Sender:

AK RIDES, s.r.o. & FUN LIGHT AMUSEMENTS, s.r.o.

Subject: False identification of amusement ride

To whom it may concern:

We have been informed that the amusement ride on the pictures below is being presented as manufactured by **AK Rides s.r.o. / Fun Light Amusements s.r.o.**

AK Rides s.r.o. and Fun Light Amusements s.r.o. have never manufactured this amusement ride!

We must inform you that connecting our company names with this machine is illegal and we must ask you to stop doing this. Also using our paperwork to operate this amusement ride is illegal and if this is happening we must ask you to stop doing this.

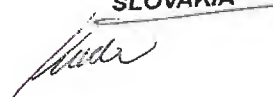
Our companies are ready to take legal actions against everyone who may violate our rights!



František Kolomazníček
FUN LIGHT AMUSEMENTS, s.r.o.

Arnošt Kubeš
AK RIDES, s.r.o.


FUN LIGHT AMUSEMENTS, s.r.o.
Pražská 298
250 01 Brandýs n/L.
IČ: 274 43 965
DIČ: CZ274 43 965


AK RIDES s.r.o.
Alžbetin Dvůr 4
Milošlavov 900 42
SLOVAKIA

Fun Light Amusements, s.r.o. / AK Rides s.r.o.

Harrison, Allan

From: Alan Ferguson [REDACTED]
Sent: Wednesday, November 14, 2018 7:30 AM
To: [REDACTED]
Cc: Harrison, Allan
Subject: THE NAME AK Rides

Hello

The Name AK Rides, The Name Funlight Amusements is an SRO Company.
Rights are given to these Companies same as - INC & LLC The use of or Copying these Name is illegal.
Accepting these Names is illegal.

With Best Regards, Alan
936 933 8499
Texas, USA

Harrison, Allan

From: Alan Ferguson [REDACTED]
Sent: Thursday, November 15, 2018 6:03 AM
To: Harrison, Allan
Subject: Amusement Rides in Florida

Hello Alan

Starting Immediately

All Rides that are using the Names or Documentation of or as AK Rides, AK Rides SRO, Funlight Amusements, Funlight Amusements SRO, kilian, Kilian SRO, Confolding, Confolding SRO., must have LEGAL COMPANY APPROVAL.
These Companies do have a USA REPRESENTATIVE.

With Best Regards, Alan Ferguson

[REDACTED]
Texas, USA

5.3 Prohibited use



It is forbidden:

Operate the attraction not in accordance with the instructions for use and maintenance

Overload attraction

Repair and maintenance of the equipment without appropriate qualification.

Working with the damaged movable electric supply.

Work without earthing Attraction.

Operating the attraction without safe and secure establishing against movement.

Exceed the maximum speed specified by the manufacturer.

Use attraction without securing the moving parts (guards, handrails, warnings)

Use attraction in strong wind or storm

Small children can enter on the attraction when calm and only with a parent or a close relationship aged over 18 years

It is recommended to enter children older than 12 years

5.4 Precautions for operation by the user

- Connection all energy supplies, including the main electrical supply should be entrusted to qualified personnel. Poorly made connecting of the machine, or parts could cause severe damage to the Attraction and jeopardize the safety of operators and users.
- Work on maintenance, repairs and periodic inspections switchboards, electrical circuits Attractions and drives equipment must be performed by qualified personnel with expertise in electrical engineering or regulations in force in the country of attractions's operation.
- External and internal protective terminal on the attraction, switchboards, and electromechanical switches, hydraulic and lighting should be connected by the user to the protective conductor of user's electrical system and properly preserved.
- Connecting the machine to the power supply must be done by a person knowledgeable and properly trained.
- Controls elements are supplied with a reduced voltage of 24V safety.
- Before operating the Attractions must be tested for proper function of protection against electric shock.
- It is necessary to carry out regular inspection of electrical equipment.

Operation and maintenance manual



CAROUSEL

STAR FLYER

Serial number -

Voltage: 3NPE~50 Hz, 400/230V/TNS,
24V -

Antonín Winkler

Pěšina 46

Brno

Drive: 2x3 phase electro motor with brake

Czech Republic

Harrison, Allan

From: Faulk, Michelle
Sent: Thursday, December 06, 2018 9:36 AM
To: Harrison, Allan
Cc: Faulk, Michelle
Subject: Midway Rides of Utica - Skyflyer
Attachments: Patron List.pdf; WINKLER- Star flyer (page 5).pdf

Allan,

Yesterday, I spoke with the Jacksonville Fire and Rescue Department who were able to confirm ages for some of the patrons involved in the accident on the Skyflyer amusement ride owned and operated by Midway Rides of Utica on November 10, 2018. Due to HIPPA Law this was the only information I was able to obtain. Attached is the patron list we were provided previously, below you will find ages of the patrons identified. As a note page 5 (see attached) of the Winkler/Pfleger Skyflyer manual states that the manufacturer recommends use of the ride for patrons older than 12 years of age. It goes on to state that small children must be accompanied by someone over the age of 18.

- [REDACTED] – age 7
- [REDACTED] – age 9
- [REDACTED] – age 8
- [REDACTED] – age 10
- [REDACTED] – age 7

Please let me know if you need any further information.

Michelle

Michelle Faulk
Senior Management Analyst II
Division of Consumer Services
Florida Department of Agriculture and Consumer Services
Bureau of Fair Rides Inspection

[REDACTED]
[REDACTED]
The Rhodes Building
2005 Apalachee Parkway
Tallahassee, Florida 32399-6500

www.FreshFromFlorida.com

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[REDACTED] (Not riding)
[REDACTED] Daughter (Riding/Not transported)
Phone number - [REDACTED]

[REDACTED] (Not Riding)
[REDACTED] - Daughter (Riding/Transported)
[REDACTED] - Father (Not Riding)
Phone Number- ([REDACTED])
Phone Number - [REDACTED]

[REDACTED] - Mother of [REDACTED] Aunt of [REDACTED] (Not Riding)
[REDACTED] - (Rider/Transported)
[REDACTED] (Rider/Transported)
[REDACTED] - Mother (Not Present at time of incident)
Phone Number - [REDACTED]
Phone Number - [REDACTED]

[REDACTED] - Mother (Not riding)
[REDACTED] - Father (Not riding)
[REDACTED] - Daughter (Riding/Not transported) EMS Bandaged Leg
Phone Number - [REDACTED]

[REDACTED] - Father (Riding/Not Transported)
[REDACTED] - Son (Riding/Not Transported)
Phone Number - [REDACTED]



Fair Rides Company Accidents Report

ADAM H. PUTNAM, COMMISSIONER

Date: 11/27/2018 05:22:09

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01/01/1995 ~ 11/27/2018

MIDWAY RIDES OF UTICA

Accidents Date	Theme Name	Cause	Comments
11/10/2018	SKY FLYER		Seven patrons injured when the carriers impacted fencing surrounding the ride during descent.

Total number of accidents: 1



Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Device History

ADAM H. PUTNAM, COMMISSIONER

Date: 11/27/2018 05:23:20

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MIDWAY RIDES OF UTICA

USAID#: 15389 SKY FLYER Device Type: Super Ride
Status: Red Tag Serial #: SF2015-3 Manufacturer: AK RIDES

Event Open: 11/11/2018 Event Name: GREATER JACKSONVILLE FAIR Inspector: COOK

Device Comments: THIS INSPECTION IS DAY TWO OF ACCIDENT INVESTIGATION. DEVICE REMAINS UNDER REDTAG PENDING FURTHER INVESTIGATION.
THIS INSPECTION WAS ORIGINALLY DONE ON CARBON ARI FORMS, ENTERING INTO DOCS TO CAPTURE INSPECTION INFORMATION. DEFICIENCIES CODES CONVERTED TO TO DOCS FORMAT.
COLLECTED OWNERS DAILY INSPECTION, OPERATOR STATEMENT, EMPLOYEE TRAINING RECORD, AND PARTIAL LIST ON PATRONS ON RIDE. OWNERS DAILY INSPECTION ARRIVED AFTER HARD COPY FORMS WERE SIGNED AND SPLIT.

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
OPERATION - RPM Check	Other				FENCE BENT, DAMAGE TO CARRIERS RED TAGGED PENDING FURTHER INVESTIGATION
ATTACHMENTS - Carrier/Tubs	Damaged	5			FIBERGLASS DAMAGED
OPERATION - Controls	Improper operation of control switches				LIMIT SWITCH BROKEN OFF MOUNTING, NO INFORMATION AS TO ITS PURPOSE
OPERATION - Controls	Improper operation of control switches				FOOTSWITCH INOP
INSTALLATION - Stairs/Ramps/Decks/Walkways	Improper distance to ground (more than 9 1/2 inches)				

Event Open: 11/10/2018 Event Name: GREATER JACKSONVILLE FAIR Inspector: COOK

Device Comments: STOP OP ISSUED DUE TO ACCIDENT THIS DATE

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
OPERATION - RPM Check	Other				FENCE BENT, DAMAGE TO CARRIERS RED TAGGED PENDING FURTHER INVESTIGATION

Event Open: 11/01/2018 Event Name: GREATER JACKSONVILLE FAIR Inspector: LYLES

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Worn				



Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Device History

ADAM H. PUTNAM, COMMISSIONER

Date: 11/27/2018 05:23:20

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MIDWAY RIDES OF UTICA

USAID#: 15389 SKY FLYER Device Type: Super Ride
Status: Red Tag Serial #: SF2015-3 Manufacturer: AK RIDES

Event Open: 10/11/2018 Event Name: FRIGHT NIGHT Inspector: YOUMANS

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Broken				

Event Open: 03/22/2018 Event Name: CITY CENTER PARK Inspector: VOLLMER

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
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Event Open: 03/15/2018 Event Name: ST. PAUL ANNUAL SPRING CARNIVAL Inspector: HAMLETT

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Latches damaged/not working	1			
ATTACHMENTS - Restraints	Latches damaged/not working	7			
ATTACHMENTS - Restraints	Latches damaged/not working	4			
ATTACHMENTS - Restraints	Latches damaged/not working	5			
INSTALLATION - Stairs/Ramps/Decks/Walkways	Improper distance to ground (more than 9 1/2 inches)				

Event Open: 03/08/2018 Event Name: OUR LADY OF THE LAKES Inspector: YOUMANS

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Latches damaged/not working	4B	13275		



Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Device History

ADAM H. PUTNAM, COMMISSIONER

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MIDWAY RIDES OF UTICA

USAID#: 15389 SKY FLYER Device Type: Super Ride
Status: Red Tag Serial #: SF2015-3 Manufacturer: AK RIDES

Event Open: 03/01/2018 Event Name: ST. AMBROSE CATHOLIC CHURCH Inspector: SPARKES

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Latches damaged/not working	4B	13275		

Event Open: 02/23/2018 Event Name: ST. VINCENT FERRER Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Latches damaged/not working	4B	13275		

Event Open: 02/19/2018 Event Name: ST. COLEMAN FESTIVAL Inspector: CORVO

Device Comments: NO DEFICIENCIES NOTED, RED TAG 7842 REMOVED

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
STRUCTURAL - Structural Integrity	Frayed/damaged cables				NO DEFICIENCIES NOTED, RED TAG 7842 REMOVED.

Event Open: 02/16/2018 Event Name: ST. COLEMAN FESTIVAL Inspector: YOUNG

Device Comments: INSPECTION NOT COMPLETE

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
STRUCTURAL - Structural Integrity	Frayed/damaged cables				

Event Open: 02/08/2018 Event Name: NATIVITY CHURCH Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
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Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Device History

ADAM H. PUTNAM, COMMISSIONER

Date: 11/27/2018 05:23:20

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MIDWAY RIDES OF UTICA

USAID#: 15389 SKY FLYER Device Type: Super Ride
Status: Red Tag Serial #: SF2015-3 Manufacturer: AK RIDES

Event Open: 01/26/2018 Event Name: PEMBROKE LAKES MALL Inspector: COOK

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
ATTACHMENTS - Restraints	Broken	2-4-10			

Event Open: 01/06/2018 Event Name: PALM BEACH KENNEL CLUB Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
INSTALLATION - Signage/Decals/Placards	Missing	1			

Event Open: 01/05/2018 Event Name: KENNEL CLUB CARNIVAL Inspector: CORVO

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments

Event Open: 12/22/2017 Event Name: MARGATE CARNIVAL Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
INSTALLATION - Stairs/Ramps/Decks/Walkways	Damaged/Broken				

Event Open: 12/15/2017 Event Name: BALLONAPALOOZA Inspector: LYLES

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments

Event Open: 12/01/2017 Event Name: IBEW Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments



Florida Department of Agriculture and Consumer Services
Division of Consumer Services, Bureau of Fair Rides Inspection

Fair Rides Device History

ADAM H. PUTNAM, COMMISSIONER

Date: 11/27/2018 05:23:20

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MIDWAY RIDES OF UTICA

USAID#: 15389 SKY FLYER Device Type: Super Ride
Status: Red Tag Serial #: SF2015-3 Manufacturer: AK RIDES

Event Open: 11/25/2017 Event Name: BROWARD CO. FAIR RIDE DEFECT Inspector: CORVO

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
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Event Open: 11/21/2017 Event Name: BROWARD CO. FAIR Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
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Event Open: 11/18/2017 Event Name: BROWARD COUNTY FAIR Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
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Event Open: 11/17/2017 Event Name: BROWARD CO. FAIR Inspector: SMITH

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
INSTALLATION - Electrical	Electrical short present				

Event Open: 12/29/2016 Event Name: FESTIVAL ON THE GREEN Inspector: YOUNG

Device Comments:

Category	Deficiencies	Unit	OST#	Correction Notice	Comments
INSTALLATION - Electrical	Electrical short present				



Florida Department of Agriculture and Consumer Services
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Fair Rides Device History

ADAM H. PUTNAM, COMMISSIONER

Date: 11/27/2018 05:23:20

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MIDWAY RIDES OF UTICA

USAID#: 15389	SKY FLYER	Device Type:	Super Ride
Status: Red Tag	Serial #: SF2015-3	Manufacturer:	AK RIDES

Event Open: 09/30/2016 **Event Name:** SCREAM PARK @ CLAY CO. FAIRGROUNDS **Inspector:** LYLES

Device Comments:

Category	Deficiencies COMMENT	Unit	OST#	Correction Notice	Comments
					RIDE INSPECTION NOT STARTED, NO I.C. ISSUED. OWNER- OPERATOR UNDERSTANDS THE RIDE MUST PASS A DEPT. INSPECTION PRIOR TO OPENING TO THE PUBLIC.

(b) Sand bagging, which is the practice of holding onto any object, including another person, while bungee jumping, for the purpose of exerting more force on the bungee cord to stretch it further, and then releasing the object during the jump causing the jumper to rebound with more force than could be created by the jumper's weight alone.

(c) Tandem or multiple bungee jumping.

(d) Bungee jumping from any bridge, overpass, or any other structure not specifically designed as an amusement ride.

(e) The practice of bungee catapulting or reverse bungee jumping.

(18) IMMEDIATE FINAL ORDERS.—

(a) An amusement ride that fails to meet the requirements of this section or pass the inspections required by this section, or an amusement ride that is involved in an accident for which a patron is transported to a hospital as defined in chapter 395, or an amusement ride that has a mechanical, structural, or electrical defect that affects patron safety may be considered an immediate serious danger to public health, safety, and welfare and, upon issuance of an immediate final order prohibiting patron use of the ride, may not be operated for patron use until it has passed a subsequent inspection by or at the direction of the department.

(b) An amusement ride of a similar make and model to an amusement ride described in paragraph (a) may be considered an immediate serious danger to the public health, safety, and welfare and, upon issuance of an immediate final order prohibiting patron use of the ride, may not be operated for patron use until it has passed a subsequent inspection by or at the direction of the department.

(19) ENFORCEMENT AND PENALTIES.—

(a) The department may deny, suspend for a period not to exceed 1 year, or revoke any permit or inspection certificate. In addition to denial, suspension, or revocation, the department may impose an administrative fine in the Class II category pursuant to s. 570.971 not to exceed \$2,500 for each violation, for each day the violation exists, against the owner of the amusement ride if it finds that:

1. An amusement ride has operated or is operating:

a. With a mechanical, structural, or electrical defect that affects patron safety, of which the owner or manager has knowledge, or, through the exercise of reasonable diligence, should have knowledge;

b. In a manner or circumstance that presents a risk of serious injury to patrons;

c. At a speed in excess of its maximum safe operating speed;

d. In violation of this section or any rule adopted under this section; or

e. In violation of an order of the department or order of any court; or

2. A manager in the course of his or her duties is under the influence of drugs or alcohol.

(b) The department shall, in its order suspending a permit or inspection certificate, specify the period during which the suspension is effective; but such period may not exceed 1 year. The permit or inspection certificate shall remain suspended during the period so specified, subject, however, to any rescission or modification of the order by the department, or modification or reversal thereof by the court, prior to expiration of the suspension period.

(c) The owner of an amusement ride, if the permit or inspection certificate for the amusement ride has been revoked by the department, may not apply for another permit or inspection certificate for the amusement ride within 2 years after the date of such revocation. If judicial review is sought and a stay of the revocation is obtained, the owner may not apply for another permit or inspection certificate within 2 years after the final order of the court sustaining the revocation.